



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2724

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/509,604 | <b>FILING OR 371(c)<br/>DATE</b><br>09/27/2004<br><b>RULE</b> | <b>CLASS</b><br>514 | <b>GROUP ART UNIT</b><br>1614 | <b>ATTORNEY<br/>DOCKET NO.</b><br>T1571P |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**

Peter Haynes Hutson, Saffron Walden, GBN, UNITED KINGDOM;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/GB03/01237 03/21/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0207139.7 03/26/2002

|  |                                    |                           |                               |                                    |
|--|------------------------------------|---------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>GBN | <b>SHEETS<br/>DRAWING</b> | <b>TOTAL<br/>CLAIMS</b><br>14 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                    |                           |                               |                                    |
| Verified and Acknowledged  | Examiner's Signature               | Initials                  |                               |                                    |

**ADDRESS**

210

**TITLE**

Pharmaceutical compositions comprising a benzofuran derivative and their use for the treatment of attention deficit/hyperactivity disorder

|                                       |   |  |
|---------------------------------------|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>920 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                       |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                       |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                       |   | <input type="checkbox"/> Other _____                           |
|                                       |   | <input type="checkbox"/> Credit                                |